Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Lifective October 1, 2005												
CLAIMS AS			S FILED - PART I (Column 1)		(Column 2)			SMALL ENTIT		· OR	OTHER SMALL	
TOTAL CLAIMS			3570					RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FI	EE 385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			70 minus 20=		. 50			X\$ 9=	•	OR	X\$18=	900
INDEPENDENT CLAIMS			S minus 3 =		*			X43=		OR	X86=	_
MULTIPLE DEPENDENT CLAIM P			RESENT					+145=		OR	+290=	291)
* If the difference in column 1 is			less than zero, enter "0" i			olumn 2		TOTAL		OR	TOTAL	1960
	C	CLAIMS AS A	MENDED	- PAR' (Colum		(Column 3)		SMALL ENTITY		OR	OTHER THAN	
		CLAIMS	1	HIGH		(Coldmin 5)	1 1		· — — — — — — — — — — — — — — — — — — —	1		4001
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMI PREVIC PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus .	· ***		-		X43=		OR-	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT				CLAIM		1	+145=		OR	+290=	
			•				L	TOTA		OR	TOTAL	
							,	ADDIT. FE	⊑	10	ADDIT. FEE	
		Column 1) CLAIMS	· · ·	Colun).		(Column 3)	1 -		-	. ,		
AMENDMENT B		REMAINING AFTER AMENDMENT	-	NUME PREVIC PAID I	BER OUSLY .	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent			CI AIAA	=		X43=	si	OR	X86=		
<u>Ш</u>	FIRST PRESE	MIATION OF MU	JETIPLE DEP	ENDENT	CLAIM	· <u> </u>	ן י	+145=		OR	+290=	
	•					•	L	TOTAL		L	TOTAL	
								ADDIT. FEE	.	OR ,	ADDIT. FEE	
	<u> </u>	(Column 1)	(Column 3)									
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	ı
	Independent	*	Minus	***	<u> </u>	=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
* Make a state in a share of its less than the sate in a share 0 units 10t in a share 0								+145=		OR	+290= TOTAL	
**	** If th "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR A	DDIT. FEE	
		mber Previously Paid					r foui	nd in the a	opropriate box	in colu	ımn 1.	